# **History of Rocky Mountain Health Plans Foundation**

#### BACKGROUND

RMHMO Foundation, Inc. ("Foundation") was incorporated as a nonprofit corporation on January 21, 1997. On February 26, 1998, the Internal Revenue Service issued a determination that the Foundation was exempt from tax under Section 501(c)(3) of the Internal Revenue Code. The stated purpose of the Foundation is broad: "The corporation is organized for charitable purposes within the meaning of section 501(c)(3) of the Internal Revenue Code." The Foundation does not have any shareholders or members and is managed by its Board of Directors.

On April 14, 2000, the Foundation filed with the Colorado Secretary of State an amendment to its Articles of Incorporation changing its name to Rocky Mountain Health Foundation. On August 2, 2006 the Foundation filed with the Colorado Secretary of State a subsequent amendment to its Articles of Incorporation changing its name to Rocky Mountain Health Plans Foundation. The Foundation also has adopted the "trade name" of Rocky Mountain Health Foundation.

Executives and other individuals associated with Rocky Mountain Health Maintenance Organization, Incorporated ("RMHMO") established the Foundation. Fundamentally, the principal reason why the Foundation was created was because employees at RMHMO, especially the nurses working one-on-one with Members, learned of circumstances where the expenditure of a relatively small amount of funds, not directly related to the payment of providers, but indirectly supportive of helping the member or others in the community achieve better health outcomes, could significantly improve a person's health. This could be for temporary housing, transportation, health expenses that fall outside of covered benefits and other components that we now characterize as the social determinants of health. The Foundation, as a distinct non-profit entity, serves to effectuate such goals. In fact, much of the funding of the Foundation's Medical Support Fund comes from RMHMO personnel themselves on a voluntary basis.

On August 29, 2005, the Board of the Foundation adopted a resolution requiring that any Amendment to the Articles or By-Laws must be approved by RMHMO.

The Foundation has filed its annual reports with the Secretary of State and is in "Good Standing."

#### **DIRECTORS & OFFICERS**

The original Board of Directors ("Board") of the Foundation consisted of Robert R. Denning, Michael J. Weber, Bruce A Ward, M.D. and Gregory K. Hoskin. On August 25, 1999, the Board adopted a resolution providing that RMHMO would appoint all directors of the Board.

Not surprisingly, the Foundation has had various Directors through the years. As of August 26, 2016 the current Directors of the Foundation are:

Corinne Johnson
Jane Brock, M.D.
Jay Seaton
Jeff Kuhr
Marilyn Green Robinson
Mike Weber

As of August 26, 2016, the officers of the Foundation are:

Mike Weber, President Corinne Johnson, Secretary Lisa Fenton-Free, Executive Director

On August 26, 2016, RMHMO appointed a new Board to be in office effective upon the closing on the Stock Purchase Agreement by and among the Foundation, RMHMO and United HealthCare Services dated July 22, 2016. All members of the new Board of Directors will be independent from RMHMO and United HealthCare Services and any of their respective affiliated entities, and following closing, neither RMHMO nor United HealthCare Services will have the ability to appoint, remove or confirm the appointment of any members of the Board of Directors of the Foundation.

The Foundation is currently managed by Lisa Fenton Free, Executive Director. Since June 24, 2002 the Registered Agent of the Foundation has been Lisa Fenton Free, and the Registered Office has been 2775 Crossroads Boulevard, Grand Junction, CO, 81506.

#### **GRANTS**

The Foundation has received grants from various organizations, including RMHMO and its affiliates, as well as the Colorado Department of Public Health and Environment and the Colorado Health Foundation. A list of the current projects of the Foundation is set forth below.

The Foundation has received grants from RMHMO consistently since its founding. The most recent grants were in the following amounts:

2014 \$114,646 2013 \$208,060 2012 \$113.209

Grants from the Colorado Department of Public Health and Environment include:

2015	\$45,015
2014	\$631,943
2013	\$101,173

2012 \$24,241

Grants from the Colorado Health Foundation include:

2015	\$165,218
2014	\$57,560
2013	\$24,496
2012	\$139,104

#### FOUNDATION PROJECTS

The following are examples of projects supported by the Foundation:

#### **BABY & ME - Tobacco Free Program**

BABY & ME – Tobacco Free (BMTF) is a cessation program for pregnant women to permanently free themselves from their tobacco dependency. Being specific to pregnant women, the program combines best practice guidelines, motivational interviewing, coaching, and practical incentives – free diapers for up to one year after their baby is born. This state-wide collaboration includes partners from the Foundation, WELCO – founders of BMTF, University of Colorado Research Department and local agencies throughout Colorado who provide prenatal services to low socio-economic groups.

The program was first initiated in in 2005 through a grant award from The Colorado Health Foundation with Colorado being the first in the nation to take this unique, incentive based program state-wide. Colorado Department of Public Health and Environment ("CDPHE") began funding the program in 2015. Six other states are now joining our efforts along with the Center for Disease Control's Maternal Child Health Department reviewing our successes and outcomes. Funding (\$500K/yr) support is provided from a grant award by the CDPHE through June, 2018.

CDPHE grant for BMTF: July 1, 2015 – June 30, 2018 Number of Agencies contracted: 33 and growing

Number of Counties: 53

The University of Colorado at Denver (UCD) evaluates the program and currently shows the following data from participating pregnant mothers:

2,229 women enrolled in the program as of 7/1/2016 93.65% of participants smoke-free by their last pre-natal visit Birthweights comparable to non-smoker rates (average 7.07 lbs.) 89.77% of participants receive Medicaid

As a result, BMTF is making an impact on reducing the burden of tobacco use in the pregnant, lower social economic status populations in Colorado.

## **Medical Support Funding**

The Foundation oversees two funds that offer one-time assistance for individuals or families who are facing a health crisis affecting their overall well-being.

## • Medical Support Fund

This fund assists individuals or families facing a <u>medical crisis</u> affecting their ability to provide for the essentials of daily living. The fund also offers one-time purchasing of services or medical supplies, not covered by insurance, which has the potential to improve an individual's health status.

There must be indications of their financial need, and the individual or family must have the capability to manage their future needs. This fund is available for residents of Colorado, although the funds are not available for paying health insurance premiums, deductibles or co-payments.

Examples of recent funding include:

- assistance with immediate and basic essentials of living, such as food, housing or utilities,
- essential prescribed medications on a one-time basis, and
- one-time housecleaning to enable a hospitalized individual to return home.

The following is an example of services funded over a one year period from the Medical Support Fund:

<u>:</u>	
Housing, Utilities, Home Repairs	\$15,277
Medical, Medications, DME	4,934
Food, Clothing, Essentials	3,408
Transportation	2,694
Other	1,506
Reimbursed by DHS	-186
TOTAL	27,633

# # of individuals served: 68

# Additional Fund Established by Anonymous Donor

This fund established by an external donor assists individuals who are doing everything they can to provide for themselves, but end up in a **financial crisis** that requires immediate attention. The Foundation then verifies the recipient can then manage their situation through their current crisis. These situations do not need to be medically related.

Individuals receiving funding must meet one of the following criteria:

- a family facing loss of home due to a fire or natural disaster
- a family that has lost income necessary to support a child

- a family with children needing one-time assistance to avoid homelessness or regain self-sufficiency
- a homeless or disadvantaged individual or low-income elderly individual needing assistance with minor medical or dental expenses
- a person fleeing a domestic abuse situation needing assistance with temporary housing or other expenses associated with becoming reestablished
- homeless or disadvantaged individual or low-income elderly needing assistance with minor medical or dental expenses
- low-income elderly or disabled person in need of funds to repair a home or purchase basic needs

## We Can! Mesa County

This is a sustainable, successful program helping families of overweight and obese children make healthy lifestyle changes. The core curriculum is a weekly program incorporating a child/parent visit with a provider, followed by an educational group class and then ending with an active group exercise. The goal is to increase health knowledge, improve health-related behaviors and stabilize body mass index in children. The program incorporates the national evidence based *We Can!* curriculum and then adds family visits and motivational interviewing. Grant dollars awarded to the Foundation by CDPHE from July, 2012 – June, 2015 total: \$271,313.

Program is self-sustaining through fund raisers and reimbursements for office visits from third party payers. The Foundation is the financial container for the program.

#### **Advance Directives**

The Foundation serves on a multiagency Mesa County Advanced Care Task Force to promote education about advance care planning in Mesa County and to encourage individuals to document their wishes for end of life care. Both nationally and locally, however, we are seeing a shift in the focus of advance care planning from simply completing the Advance Directives to encouraging quality conversations between individuals and their families/loved ones and between physicians and their patients.

The Foundation also promotes The Conversation Project, an initiative developed by journalist, Ellen Goodman. The Conversation Project works in collaboration with the Institute for Healthcare Improvement. Ellen Goodman is dedicated to helping people talk about their wishes for end-of-life care (*See http://theconversationproject.org/*). On April 14, 2015, in Grand Junction, the Foundation co-sponsored a community event of: Train the Trainer and general public sessions on The Conversation Project with Jean Abbott, MD, from Boulder as the main presenter. Dr. Abbott lectures regionally and nationally and writes about ethics and professionalism issues in clinical practice, emergency medicine and other graduate medical education specialties through the University's Center for Bioethics and Humanities.

The Foundation is exploring ways it can be involved in a corollary focus of The Conversation Project, which is developing "capacity" within the medical provider community to have better conversations with patients about their end-of-life decisions.

#### **Sustaining Integrated Care (SHAPE)**

In partnership with the University of Colorado, Denver, Department of Family Medicine, and the Collaborative Family Health Association, the Foundation also participates in Sustaining Integrated Care (SHAPE) through testing a global budget model for integrated healthcare (medical, mental and behavioral) in six primary care practices in western Colorado. Because mental and behavioral needs are presented in a primary care setting more often than in any other, the Foundation believes that a payment model to support an integrated approach is needed.

The goal of this project is to determine:

- if a global payment method will financially support and sustain behavioral health in primary care;
- to understand how different payment models will affect clinical models of integration and their related costs; and
- the real world application of a global payment methodology on primary care practices who have integrated behavioral health wit the end goal to inform policy.

# **Hygiene Kits for Homeless Students**

Many children in the public school system are living in shelters, vehicles or in other inadequate conditions. To help those in need, the Foundation (often through the support of RMHMO employees) provides hygiene kits to 1,000 homeless children each year. The kits offer many items children need to take care of themselves, including toothbrushes, toothpaste, floss, soap, deodorant, shampoo, nail clippers, lotion, cotton swabs, and more.